



National
Aeronautics and
Space
Administration

Survey Report

SURVEY NUMBER

VOUCHER NUMBER

NOTE: See Instructions on Page 4.

I - BASIC DATA (To be completed by individual last having possession of equipment)

1. NAME AND POSITION TITLE

2. ORGANIZATION NAME AND CODE

3. INSTALLATION

4. DATE OF DISCOVERY

5. IDENTIFICATION OF EQUIPMENT

a. EQUIPMENT
CONTROL NO.b.
DESCRIPTIONc.
QUANTITYd.
VALUE

6. EQUIPMENT LISTED ABOVE WAS (Check appropriate box)

☐ LOST☐ DAMAGED☐ DESTROYED☐ BELIEVED STOLEN

DATE SECURITY NOTIFIED:

7. STATEMENT OF CIRCUMSTANCES (Continue on separate sheets if necessary)

8. SIGNATURE

9. DATE OF REPORT

II - REVIEW DATA (To be completed by the Division Director/Chief of Individual above)

1. ACTION RECOMMENDED TO PREVENT RECURRENCE OF INCIDENT

2. NAME AND TITLE

3. SIGNATURE

4. DATE

III - EQUIPMENT MANAGEMENT USE ONLY

SENSITIVE ITEM

☐ YES ☐ NO

RESULTS OF INVENTORY DATED:

☐ TRIENNIAL ☐ SENSITIVE

SIGNATURE OBTAINED

☐ 1602 ☐ CUSTODIAN VALIDATION ☐ OTHER

IV - FINDINGS AND RECOMMENDATIONS

1. INCIDENT INVESTIGATED BY (Check appropriate box)

☐

PROPERTY SURVEY OFFICER

☐

PROPERTY SURVEY BOARD

2. STATEMENT OF FINDINGS (Continue on separate sheet, if necessary)

3. RECOMMENDATIONS *(Based on "STATEMENT OF FINDINGS" in section III, item 2.)*

- ☐ ALL CONCERNED SHOULD BE RELIEVED OF ACCOUNTABILITY AND RESPONSIBILITY FOR PROPERTY LISTED IN PART 1.
- ☐ THE NAMED RESPONSIBLE INDIVIDUALS *(Specified in the findings)* ARE CONSIDERED ACCOUNTABLE, AND THIS REPORT WILL BE REFERRED TO THEIR SUPERVISORS *(or Contracting Officer)* FOR POSSIBLE DISCIPLINARY OR OTHER APPROPRIATE ACTION.

4. SPECIFIC CORRECTIVE OR PREVENTIVE ACTION TO BE TAKEN TO PREVENT RECURRENCE OF INCIDENT

V - SIGNATURES OF THE PROPERTY SURVEY BOARD

CHAIRMAN	SIGNATURE	DATE
MEMBER	SIGNATURE	DATE
MEMBER	SIGNATURE	DATE

VI - SIGNATURE OF THE PROPERTY SURVEY OFFICER

NAME	SIGNATURE	DATE
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DISTRIBUTION OF SURVEY REPORT

ORIGINAL - SURVEY REPORT FILE
COPY TO - RESPONSIBLE INDIVIDUAL
COPY TO - RESPONSIBLE INDIVIDUAL DIVISION DIRECTOR/CHIEF
COPY TO - EQUIPMENT VOUCHER FILE

INSTRUCTIONS

Upon completion of section II, forward original form to Equipment Management for processing. Copies will be distributed after all signatures have been obtained. This form is self-explanatory except for the following:

I - BASIC DATA (To be completed by the individual last having possession of the item(s).)

IDENTIFICATION OF EQUIPMENT

- a. EQUIPMENT CONTROL NUMBER. Enter the NEMS equipment control number. If none, enter NONE.
- b. DESCRIPTION. Enter the full description of the item as stated on the NEMS equipment record, if available.
- c. QUANTITY. Enter the quantity of the property. For equipment items, this should be a 1.
- d. VALUE. Enter the value as reflected on the NEMS equipment record, if available. If the item is not in NEMS, enter a value constructed from the item acquisition documentation, or other available documentation. If the value is estimated, enter a small "e" after the value.

STATEMENT OF CIRCUMSTANCES. Give a detailed explanation of the circumstances about the discovery. Include the following:

- * If custody of the item was with another party
- * The name(s) of the individual(s) who had access to the item
- * What security and control procedures were in-place to control the item
- * An explanation of the search conducted to date
- * The details of inquiries made in an attempt to locate the item
- * Who saw the item last, and when

II - REVIEW DATA (To be completed by the Division Director/Chief of the individual name in Section I.)

STATEMENT OF FINDINGS. State the specific recommendations that will prevent the recurrence of incidents of this nature. Any corrective actions that are accomplished should also be documented here.